## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and FUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless converted maintenance fee notification	below or directed other	rwise in Block 1, by (a	() shecithing a new cours	mongence accress; a	mot to morestug a sele	arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Pee(s) Fognsmittal. This centificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own retricions of mailing or transmission.			
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LANDO & ANA ONE MAIN STRE CAMBRIDGE, M.	ET, SUITE 1100		I he Stat addi tran	ceby certify that this es Postal Service wi ressed to the Mail smitted to the USPT	Fec (f) Transmittat is bein h sufficient postage for fir Stop ISSUE PRE address ) (571) 273-2885, Style (	mission g deposited with the United st class mall in an envelope above, or being fassimite iste indicated below.	
					(Depositor's name)		
						(Signature)	
						Page	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/712.685			Evgeniya Freydina		10168-708019	9109	
TITLE OF INVENTION: W	VATER TREATMENT	SYSTEM AND METH	OD				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	11/09/2010	
EXAMINI	ER	ART UNIT	CLASS-SUBCLASS	1 1			
DRODGE, JOS	<u></u>	1797	210-143000	3			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/47; Rev 03-02 or more recont) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be existed.				
							3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN
	s Water Tech	-	•	le, Pennsyl Nadividual Ö Con		roup entity Government	
4a. The following fee(s) are	***************************************				y previously paid issue fet		
Na Publication Fee (No s		rmitted)	Payment by credit ca	rd. Form PTO-2038 y authorized to charg osit Account Number	is attached. e.the required fee(s), any d - <u>50/2/62</u> (enclose	eficiency, or credit any an extra copy of this form).	
5. Change in Entity Status  a. Applicant claims S	MALL ENTITY status	See 37 CFR 1.27.	☐ b. Applicant is no for	ager claiming SMAL	L ENTITY status. See 37 (	FR 1.27(g)(2).	
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Authorized Signature							
			Date <u>28 Oct.</u> 2010 Registration No. 34,654				
MICRODINIA ABRIBIA VANTA	*X*4.29%				e public which is to file (a innites to complete, includ nments on the amount of I rademark Office, U.S. De SEND TO: Commissione isplays a valid OMB contro	nd by the USPTO to process) ing gathering, proparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1459, of number.	